FORM D

U. S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Form D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

Filing Under (Check box(es) that apply)	. ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☒ Secti	on 4(6) ULOE	
Type of Filing: New Filing	☐ Amendment		
	A. BASIC IDENTIFICATION		
1. Enter the information request	ed about the issuer	04049	990
Name of Issuer (check if this is an at Vista Exploration Corporation	mendment and name has changed, and indicate change	.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code	e)
11011 King Street, Suite 260, Ove	rland Park, KS 66210	913-338-5550	
Address of Principal Business Operation (if different from Executive Offices)	s (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Gode	
same		NOV 1 6 2004	r
Brief Description of Business		THOMSON	R
Design, management, and market	ing of law enforcement related products.	FINANCIAL	حت
Type of Business Organization ☑ corporation ☐ business trust	limited partnership, already formed limited partnership, to be formed	other (please specify):	
Actual or Estimated Date of Incorporation	on or Organization: 4 98 🛛 Actual 🗌 Est	imated	
Jurisdiction of Incorporation or Organiza	ation: (Enter two-letter U.S. Postal Service abbreviation CN for Canada; FN for other foreign jurisdict		
GENERAL INSTRUCTIONS			

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed not later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U. S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



	A. BASIC IDENTIFIC	CATION DATA								
2. Enter the information requested	for the following:									
	er, if the issuer has been or	ganized within the	past 5 years;							
• Each beneficial owner have	Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or									
more of a class of equity s	more of a class of equity securities of the issuer;									
• Each executive officer and	d director of corporate issu-	ers and of corporate	general and ma	anaging partners of						
partnership issuers; and										
 Each general and managir 	ng partner of partnership is:	suers.								
Check Box(es) that Apply: Promoter	⊠ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Ross, Charles A., Sr.										
Business or Residence Address (Number an										
11011 King Street, Suite 260, Overla										
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	Executive Officer		☐ General and/or Managing Partner						
Full Name (Last name first, if individual) Owen, David C.										
Business or Residence Address (Number and 11011 King Street, Suite 260, Overla										
Check Box(es) that Apply: Promoter			Director	General and/or Managing Partner						
Full Name (Last name first, if individual)			 							
Owen, Laura E.										
Business or Residence Address (Number ar 11011 King Street, Suite 260, Overla										
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Mason, Roger L.										
Business or Residence Address (Number ar 11011 King Street, Suite 260, Overla										
Check Box(es) that Apply: Promoter	Beneficial Owner		Director Managing Partner	General and/or						
Full Name (Last name first, if individual) Garrison, John C.										
Business or Residence Address (Number ar 11011 King Street, Suite 260, Overla										
Check Box(es) that Apply: Promoter		☐ Executive Officer	☐ Director Managing Partner	General and/or						
Full Name (Last name first, if individual)			<u></u>							
Business or Residence Address (Number ar	nd Street, City, State, Zip Code)									
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)										
Business or Residence Address (Number an	nd Street, City, State, Zip Code)									
(Use blan	k sheet, or copy and use additiona	al copies of this sheet, as	necessary.)							

				B. IN	FORMA	TION A	BOUT C	FFERIN	۱G			
1.	<u>-</u>									Yes □	No	
2.	1, , , ,									\$ <u>N/A</u>		
3.	Does the	e offering p	ermit joint	ownership	of a single (unit?					Yes	No ⊠
4.	similar i associat dealer. for that	remuneration ed person of If more that broker or de	on for solicing agent of a notice (5) per ealer only.	tation of pu broker or o	irchasers in dealer regis	connection tered with t	with sales he SEC and	of securities Vor with a s	s in the offe	ering. If a p es, list the n	ame of the	listed is an
Full Nan N/A	ne (Last na	me first, if	individual)									
	s or Reside	nce Addres	s (Number :	and Street,	City, State,	Zip Code)						
Name of N/A	Associate	d Broker or	Dealer									
States in					ds to Solicit lual States)			-			All	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar	ne (Last na	me first, if	individual)									
Business	or Reside	nce Address	s (Number :	and Street,	City, State,	Zip Code)	····-		-			
Name of	f Associate	d Broker or	Dealer									
	(Check	"ALL STA	TES" or ch		ds to Solicit lual States)						_	ll States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar	ne (Last na	me first, if	individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of	Name of Associated Broker or Dealer											
States in					ds to Solicit		;					
[AL] [IL] [MT] [RI]	(Check [AK] [IN] [NE] [SC]	"ALL STA' [AZ] [IA] [NV] [SD]	TES" or ch [AR] [KS] [NH] [TN]	eck Individ [CA] [KY] [NJ] [TX]	lual States). [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]		N States [ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND I	JSE PROCI	EEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	_ \$
	Equity	\$_145,000	\$145,000
	□ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	_ \$
	Other (Specify)	\$	\$
	Total	\$ 145,000	\$145,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 145,000
	Non-accredited Investors		0
	Total (for filings under Rule 504 only)		\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question I.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505 Regulation A Rule 504 Total		\$ \$ \$
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs.		\$ <u>100.00</u>
	Legal Fees		\$ \$500.00 \$
	Engineering Fees.	🗖	\$
	Sales Commissions (specify finder's fees separately)		\$ \$500.00
	Total		\$ <u></u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPE	NSES AND USE F	PROCEED	S
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1, and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$	143,900
5. Indicate below the amount of adjusted gross proceeds to the issuer used or proposed to be of the purposes shown. If the amount for any purpose is not known, furnish an estimate and to the left of the estimate. The total of payments listed must equal the adjusted gross processet forth in response to Part C - Question 4.b above.	i check the box		
	Payments to Officers, Directors, & Affiliates	Paymen Others	ts To
Salaries and Fees			
Purchase, rental or leasing and installation of machinery and equipment			
that may be used in exchange for the assets or securities of another issuer pursuant a merger)	🗆 \$		
Working Capital	🗆 \$	🛛 🗖 \$	43,900
Other (specify):lnventory		🛛 \$	1,00,000
Column Totals	🗆 \$	D \$	143,900
Total Payments Listed (column totals added)	🛭 \$	143,900	
). FEDERAL SIGNATURE		:	
The issuer has duly caused this notice to be signed by the undersigned duly authorized pollowing signature constitutes an undertaking by the issuer to furnish the U.S. Securities and is staff, the information furnished by the issuer to any non-accredited investor pursuant to part	1 Exchange Commissio agraph (b) (2) of Rule 5	n, upon writter 02.	ule 505, the n request of
ssuer (Print or Type) Signature	Date		
Vista Exploration Corporation lame of Signer (Print or Type) Title of Signer (Print or Type)	ew Nov	ember 1, 2	004
rathe of Signer (Fillit of Type)			
David C. Owen	Chi	ef Executiv	e Officer
- CONTRACTION			
ATTENTION			

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1		2	3						5		
	accredited S	sell to non- l investors in tate – Item 1)	Type of Security and aggregate offering price offered in State (Part C – Item 1)	Type of	Type of Investor and amount purchased in State (Part C – Item 2)				Disqualification under State ULOE (If yes, attach an explanation of waiver granted) (Part E - Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL				Investors		IIIVESIOIS					
AK							<u> </u>				
AZ	-										
AR											
CA				-							
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CT											
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GA											
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KS		X	Common Stock \$70,000	3	\$70,000	0	0				
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MD						†					
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MI				-				-			
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МО		X	Common Stock \$75,000	1	\$75,000	0	0				
MS			,								

Intend to sell to non- accredited investors in State (Part B – Item 1) State Yes No No Number of Accredited Investors NV NN	1	2 3				4	5				
State Yes No		accredited St	investors in	Type of Security and aggregate offering price offered in State		Type of Investor and amount purchased in State				State ULOE (If yes, attach an explanation of waiver	
MT NE NV NN NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VA VT WA WV WI	State				Accredited	Amount	Non- Accredited	Amount	Yes	No	
NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VA VT WA WV WI	MT										
NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VA VT WA WV WI	NE										
NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VA VT WA WV WI	NV										
NM	NH										
NY NC ND OH OH OK OR PA RI SC SD TN TX UT VA VT WA WV WI	NJ	<u> </u>		, , , ,							
NY NC ND OH OH OK OR PA RI SC SD TN TX UT VA VT WA WV WI	NM										
ND OH OK OR OR PA RI SC SD TN TX UT VA VT WA WV	NY						***				
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SC SD TN TX UT VA VT WA WV WI	PA										
SC SD TN TX UT VA VT WA WV WI	RI										
TN	SC		-								
TX	SD			The second secon							
UT VA VA VT WA WV WI WI	TN										
VA VT VT VT WA VT WV VT WI VT	TX					-					
VT WA WA WV WI WI	UT					1,100					
WA WV WI	VA										
WV WI	VT										
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WY	WY										